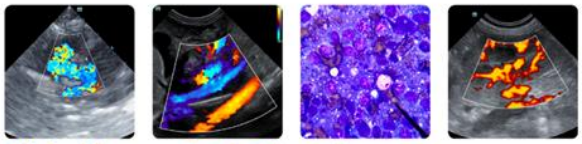


PATIENT

Walter Pollino

SPECIES

Canine

BREED

German Shorthair Pointer

SEX

MN

AGE

8yr

WEIGHT

72lb

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Dr. Megan Bray

HOSPITAL NAME

Taylorsville Veterinary Clinic

REFERRING VET

Melissa Earp

INVOICE
23305

DATE
12/22/2025

PRESENTING CLINICAL SIGNS

Patient presented on Saturday 12/20/25 for lethargy and pale gums. FAST scan revealed what appeared to be splenic mass with free fluid in the abdomen. Returning today for full ultrasound, three view thoracic rads (appear clear of mets), and pre-surgical labs. Owner wants to move forward with splenectomy tomorrow if ultrasound is free of other concerns.

Abnormal PE/Chem/CBC/UA Results: Labs going out today.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 7.9 cm in length. The right kidney measured 8.3 cm in length.

The area of the iliac trifurcation was free of pathology including no evidence of medial iliac or sublumbar lymphadenopathy or masses. No evidence of distal aortic thrombus.

The area of the residual prostate appeared normal and free of pathology

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.68 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.68 cm width at the caudal pole.

Spleen

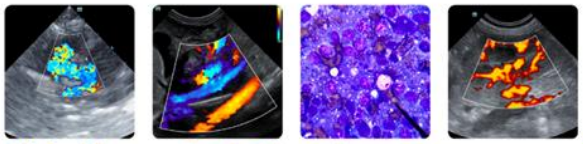
A moderately sized to expansive mixed echogenic mass was present in the area of the cranial spleen effacing the caudal liver measuring ~ 10 cm in diameter. Concurrent subtle to discrete splenic nodules were present, an example of a nodule measured 0.75 cm in diameter. The remainder of the spleen exhibited heterogeneous parenchyma and areas of asymmetrical splenic capsule contour.

Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was indistinctly visualized with subjective anechoic bile present.

Gastrointestinal



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

Mild perisplenic hyperechoic omentum was present.

Moderate volume, mildly echogenic peritoneal effusion was present.

No visualized significant or overt mesenteric /medial iliac lymphadenopathy.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

Primary

- Cranial splenic mass with concurrent separate intermittent splenic nodules.
- Mild hepatic parenchymal remodeling with normal hepatic vascular volume.
- Echogenic peritoneal effusion and perisplenic mild hyperechoic omentum.
- Subjective normal echocardiogram

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although histopathology is required for definitive diagnosis, the splenic mass is most suggestive of neoplasia such as sarcoma or other. Benign pathologies are possible yet considered less likely.

Definitive evidence of cardiac or intra-abdominal major organ macrometastasis was not sonographically obvious. Potential for micrometastasis or non-sonographically evident metastasis as well as potential early regional omental seeding, non-obvious perisplenic lymphadenopathy or omental adhesions cannot be definitively excluded.

If no evidence of pathology on 3 view chest radiographs, laparotomy with expectation towards splenectomy and gross inspection of the peritoneal cavity is warranted.

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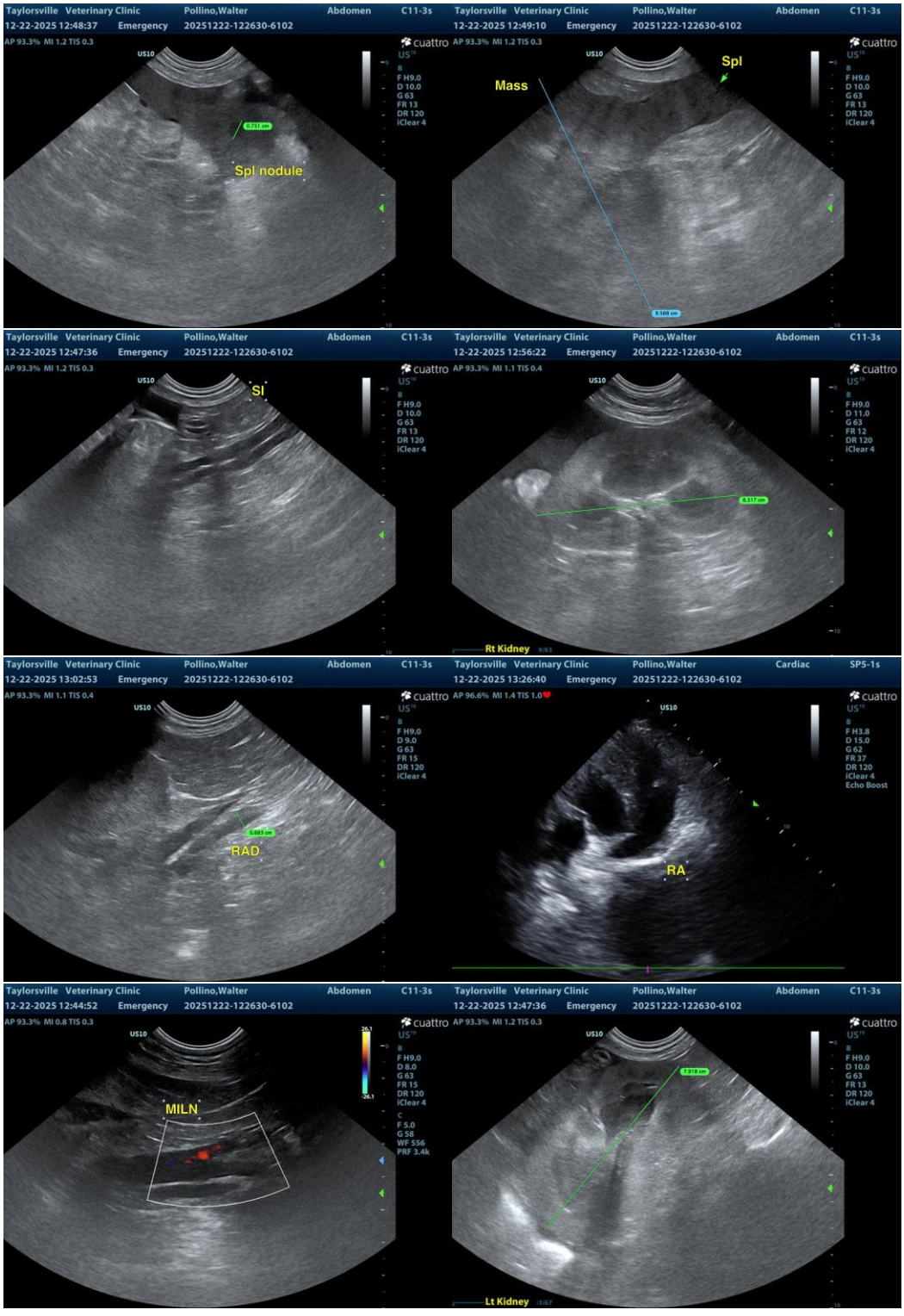

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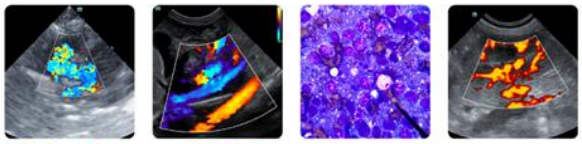

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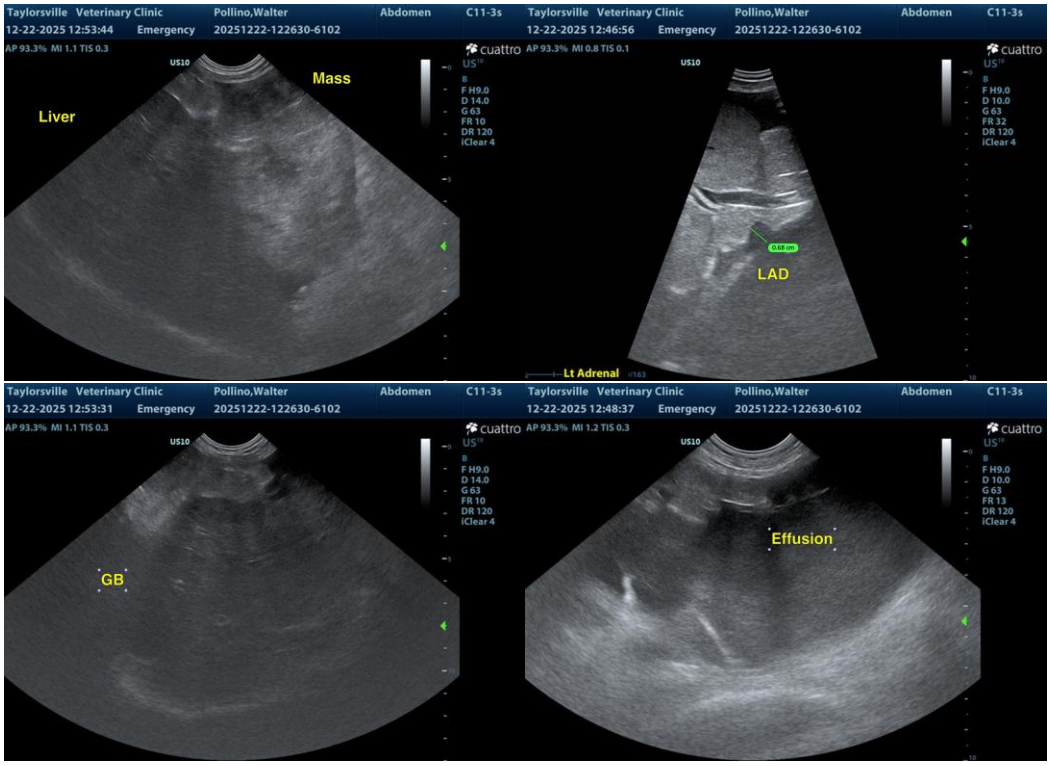

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com